

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JK		6/5/00
O.I.P.E. CLASSIFIER		18	8/14/00
FORMALITY REVIEW	AL	574	8/7/00
RESPONSE FORMALITY REVIEW	RT	515	10-19-00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	6/5/00
2	6/5/00
3	6/5/00
4	6/5/00
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Claim	Date
Final	
Original	
51	6/5/00
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100	6/5/00

Claim	Date
Final	
Original	
101	6/5/00
102	6/5/00
103	6/5/00
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147	6/5/00
148	6/5/00
149	6/5/00
150	6/5/00

If more than 150 claims or 10 actions  
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